

California Mileage Verification

In accordance with Section 2632.5 (c)(2)(B)(i) of the California Code of Regulations

Name: Rene Apelo
Flora Tarcila E Apelo

Please fill out the Current Odometer Reading and Total Annual Mileage columns for each vehicle listed below. Sign, date and return the completed form to us within 30 days.

Vehicle Year/Make/Model	VIN	Current Odometer Reading	Total Annual Mileage
2007/SUBA/B9 TRIBECA	4S4WX85D974403599	272,310.0	1,800.0
2021/SUBA/ASCENT PREM	4S4WMAFD1M3462209	28,697.0	9,500.0
/ /		, .0	, .0
/ /		, .0	, .0
/ /		, .0	, .0
/ /		, .0	, .0



Use **one** of the following options to provide your mileage information:

- Upload: Go to connectbyamfam.com/CAMiles (or scan the QR code). Access your auto policy and select "Upload Documents" from the Documents tab.
- Mail: American Family Connect Property and Casualty Insurance Company, P.O. Box 77093, Madison, WI 53707-1093.

I certify that the information provided to validate my mileage is accurate to the best of my knowledge. If I do not provide the requested information **within 30 days**, my mileage may default, which may result in an increase in premium.

I understand that I may be asked for additional documentation to substantiate my mileage estimate and that I may be charged additional premium for a policy term if a vehicle's actual annual mileage is greater than what I listed. I understand that I will need to update mileage upon subsequent renewals.

Signature (required)

Date

12/30/24

This form is not a renewal offer.